FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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FORM D

NOTICE OF SALE OF SECURITIES 2 9 2008 PURSUANT TO REGULATION Washington, DC **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		<u></u>	Serial			
	I	1				
	DATE R	ECEIVED				
	1	1				

Name of Offering (check if this is an a	mendment and name has chan	ged, and indicate cha	nge.)				
Seed Series Preferred Stock							
Filing Under (Check box(es) that apply):	Rule 504 Rule 5	05 🔯 Rule :	506 🔲 S	Section 4(6)UL	<u>OE</u>		
Type of Filing: New filing	Amendment			PROC	ESSED		
,, , , , , , , , , , , , , , , , , , , ,				9	-0020		
	A. BASIC II	ENTIFICATION DA	ATA	D AUG O	1.2008		
1. Enter the information requested about the	e issuer.						
Name of Issuer (check if this is an ame	ndment and name has changed	l, and indicate change	.)	TUOMICON	DELITERA		
Buyology, Inc.				THOMSON	KEUIEKS		
Address of Executive Offices	(Number a	nd Street, City, State	, Zip Code)	Telephone Number	r (Including Area Code)		
800 Anacapa Street, Suite A, Santa Barba	ara, CA 93101			(805) 705-5262			
Address of Principal Business Operations	(Number a	nd Street, City, State	, Zip Code)	Telephone Number	r (Including Area Code)		
(if different from Executive Offices)			_				
Brief Description of Business							
•							
Holding Company							
Type of Business Organization							
orporation	limited partnership, alrea	dy formed	Oth	er (please specify):Lin	nited Liability Co.		
business trust	☐ limited partnership, to be	•	_	, , , , , , , , , , , , , , , , , , , ,	·		
	Innited partite simp, to be						
		Month	Year				
Actual or Estimated Date of Incorporation or	r Organization:	0 4	0 8	🛛 Actual 🔲 Est	imated		
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:							
	CN for Canada; FN for other		В	r -			
	Civitor Canada; Fivitor other	roreign jurisdiction)					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

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		NTIFICATION DATA	<u> </u>					
2. Enter the information requested for the following:								
•	 Each promoter of the issuer, if the issuer has been organized within the past five years; 							
 Each beneficial owner having the p of the issuer; 	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
Each executive officer and director	and the second s							
Each general and managing partne	r of partnership issuers.							
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner				
Full Name (Last name first, if individual)								
, , ,								
FOSTER, Frank	0' 0 2' 0							
Business or Residence Address (Number and	I Street, City, State, Zip C	(ode)						
800 Anacapa Street, Suite A, Santa Barba	ra, CA 93101							
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner				
Full Name (Last name first, if individual)								
SINGER, Gary		_						
Business or Residence Address (Number and	l Street, City, State, Zip C	Code)	_					
	C + 03101							
800 Anacapa Street, Suite A, Santa Barba Check Box(es) that Apply: Promoter	ra, CA 93101 Beneficial Owner	Executive Officer	□ Director	General and/or				
Check Box(es) that Apply. Promotes	Benencial Owner		Ø Director	Managing Partner				
Full Name (Last name first, if individual)								
LINDSTROM, Martin								
Business or Residence Address (Number and	1 Street, City, State, Zip C	Code)						
Control Control Control Double	CA 02101							
800 Anacapa Street, Suite A, Santa Barba Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or				
Check Box(es) that Apply. G Promoter	_ beneneta owner			Managing Partner				
Full Name (Last name first, if individual)								
Business or Residence Address (Number and	d Street, City, State, Zip C	Code)						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first, if individual)								
run Name (Last name mst, m murviduar)								
Business or Residence Address (Number and	Street City State Zin ('ode)						
Dusiness of Residence Address (Number and	ouce, ony, blue, the	,						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)								
Business or Residence Address (Number an	d Street, City, State, Zip C	Code)	·					
·	·							
(Use bla	ank sheet or copy and use	additional copies of this she	eet, as necessary.)					

B. INFORMATION ABOUT OFFERING															
1.	Has	the issue	r sold, or	does the is	suer intend	to sell, to n	on-accredi	ted investo	ors in this	offering?.				Yes	No ⊠
	Answer also in Appendix, Column 2, if filing under ULOE.														
2.									No No						
3.	Does the offering permit joint ownership of a single unit?														
 Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) 															
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Nor Bus		or Reside	ence Addı	ress (Numb	per and Stre	et, City, St	ate, Zip Co	de)							
				`		. •	•								
Nan	ne of	Associate	ed Broker	or Dealer		<u></u>									<u>.</u>
Stat	es in	which Pe	rson Liste	ed Has So	icited or Int	ends to Sol	icit Purcha	sers							
(Ch	eck '	'All States	s" or chec	k individu:	al States									All States	
[Al		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [M]	_	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI	-	[SC]	[SD]	[TN]	[TX]	້ [ບT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	l Nar	ne (Last n	ame first,	if individe	ıal)										
Bus	siness	or Resid	ence Add	ress (Numi	ber and Stre	et, City, St	ate, Zip Co	ode)	_						
Nar	ne of	Associat	ed Broker	or Dealer											
Stat	tes in	which Pe	rson Liste	ed Has Sol	icited or In	tends to So	licit Purcha	sers							
(Ch	ieck '	'All State:	s" or chec	k individu	al States								🗀	All States	
[Al	-	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[IL] [M'		[IN] [NE]	[IA] [NV]	[KS] [NH]	(KY) [NJ]	[LA] [NM]	[ME] [NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]		
[RI		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Ful	l Nar	ne (Last n	ame first,	, if individ	ual)										
							_								
Business or Residence Address (Number and Street, City, State, Zip Code)															
Name of Associated Broker or Dealer															
States in which Person Listed Has Solicited or Intends to Solicit Purchasers															
(Check "All States" or check individual States															
[A]	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL [M		[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[R]		[SC]	ISDI	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	A	A a A laura de
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$80.00	\$880.00
	☐ Common ☒ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify Membership Interest)	\$	\$
	Total	\$880.00	\$880.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Aggregate	
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	5	\$880.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the user, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	5002.11,	\$
	Regulation A		\$
	Rule 504	-, ,	\$
			\$
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the		Ψ
4.	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ <u>N/A</u>
	Printing and Engraving Costs		\$ <u>N/A</u>
	Legal Fees	\boxtimes	\$to be determined
	Accounting Fees		\$ <u>N/A</u>
	Engineering Fees		\$ <u>N/A</u>
	Sales Commissions (specify finders' fees separately)		\$ <u>N/A</u>
	Other Expenses (Identify)		\$ <u>N/A</u>
	Total	\boxtimes	\$ to be determined

C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AN	J QI	SE OF PROC	EEEDS
b. Enter the difference between the aggreand total expenses furnished in response to proceeds to the issuer."	\$ <u>880.00</u>			
for each of the purposes shown. If the an and check the box to the left of the esti	gross proceeds to the issuer used or proposed to be us nount for any purpose is not known, furnish an estim mate. The total of the payments listed must equal rith in response to Part C - Question 4.b. above.	ate	Payments to Officers Directors, & Affiliates	Payments to Others
Salaries and fees			\$	S0
Purchase of real estate			\$0	S0
Purchase, rental or leasing and installation	of machinery and equipment		\$	\$0-
Construction or leasing of plant buildings a	and facilities		\$ <u>-0-</u>	S0
Acquisition of other businesses (including offering that may be used in exchange for issuer pursuant to a merger)	\$0	S0		
Repayment of indebtedness			\$ <u>-0-</u>	\$ <u>-0-</u>
Working capital			\$0	⊠ \$ <u>880.00</u>
Other (specify):			\$0-	S -0-
Column Totals	[\$	⊠ \$ <u>880.00</u>
Total Payments Listed (column totals adde	ed) [\$	⊠ \$ <u>880.00</u>
	D. FEDERAL SIGNATURE			
signature constitutes an undertaking by the issu	ned by the undersigned duly authorized person. If this er to furnish to the U.S. Securities and Exchange Compactredited investor pursuant to paragraph (b)(2) of Rul	missi	on, upon written	Rule 505, the following Request of its staff, the
Issuer (Print or Type)	8tgnature		Date	
Buyology, Inc.			1 7/	23/08
Name of Signer (Print or Type)	Title of Signer (Arint or Type)			
Frank Foster	Secretary			
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ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)